

REMARKS

Claims 49-61 are pending in the Application. Claims 49, 53, 54, and 60 have been amended. Specifically, independent claims 49, 54, and 60 have been amended to recite the feature wherein *a user is presented with one or more alternative drugs based at least in part on the querying/identifying step*. Claim 54 has also been amended to correct a typographical error identified by the Examiner in the June 28, 2006 Office Action. In addition, dependent claim 53 has been amended to recite the feature wherein the clinical database is queried with the one or more alternative drugs prior to presentation to the user.

In the Office Action dated June 28, 2006 claims 54 was objected to because of an inadvertently included phrase. The phrase at issue has been deleted to overcome this objection. In the Office Action, claims 49-57 and 59-61 were rejected under § 103(a) as being unpatentable over Schrier et al. (U.S. Patent No. 6,317,719) in view of Bloom et al. (U.S. Patent No. 6,070,761) and further in view of Akers et al. (U.S. Patent No. 6,112,182). Claim 58 was rejected under § 103(a) as being unpatentable over Schrier et al. in view of Bloom et al. and Akers et al. and further in view of Mayaud.

In response to the new § 103 rejections, Applicants have amended each independent claim. In particular, claims 49, 54, and 60 have been amended to recite the feature wherein a user is presented with one or more alternative drugs based at least in part on the querying/identifying step. Applicants submit that the cited prior art neither discloses nor suggests this feature. In the Office Action, Schrier et al. was cited against former claim 53 (see Office Action, ¶ 12, citing Col. 7, line 64 – Col. 8, line 3) for suggesting the feature of modifying the drug therapy regimen based on the report. A review of Schrier et al. indicates, however, that this passage relates to the system's purported ability to

detect interactions between concomitant drugs, i.e., multiple drugs taken at the same time. According to Schrier et al., the system merely identifies (through the use of colors or a darkened appearance of a button) to identify potential interactions. There is no disclosure in Schrier et al. that a user is presented with one or more alternative drugs based at least in part on the querying/identifying step. For this reason, the amended claims distinguish over the cited art of record. Moreover, the newly cited Akers et al. reference also fails to disclose this feature. Akers et al. discloses a number of "actions" that may be generated in response to certain triggers. The actions include scheduling another appointment, initiating a batch process, issuing a coupon, printing a claim form, display/printing of notes, calling another program, submitting a claim, initiating lifestyle management, initiate monitoring, S.O.A.P., printing of supplemental data, and key-in data. Col. 8, lines 21-27. Akers et al., however, does not present to the user alternative drug choices. In this regard, Applicants' invention offers users (such as pharmacist) the ability to efficiently and safely identify alternative drug(s) that do not pose a conflict, for example, with another drug the patient is taking or some other medical condition the patient is experiencing.

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Applicants believe the current amendments to the claims distinguish the cited art of record. Consideration of the pending claims on the merits is respectfully requested. If there are any questions concerning this paper, please contact the undersigned at (949) 677-7758.

Respectfully submitted,

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